

61

12-11-03

RCE/B

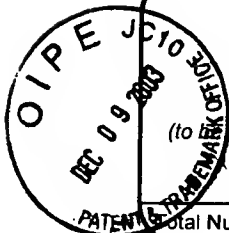
Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/998,764
Filing Date	November 29, 2001
First Named Inventor	Masaki Nakamura
Group Art Unit	1755
Examiner Name	Shalie A. Manlove
Attorney Docket Number	56232.13

Total Number of Pages in This Submission

15

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response to Office Action (6 pages) <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Express Mail Label No. EV 337978668 US <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) <input checked="" type="checkbox"/> RCE Transmittal (in duplicate) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Declaration under 37 C.F.R. §1.132
Remarks <div style="text-align: center;"> RECEIVED DEC 16 2003 TC 1700 </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigan, Reg. No. 44,826
Signature	
Date	December 9, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: December 9, 2003

Typed or printed name	Dilora Haddad		
Signature		Date	December 9, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Commissioner for Patents
Mail Stop RCE
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/998,764
Filing Date	November 29, 2001
First Named Inventor	Masaki Nakamura
Art Unit	1755
Examiner Name	Shalie A. Manlove
Attorney Docket Number	56232.13

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. Enclosed
- i. ☒ Amendment/Reply (6 pages)
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other _____

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required)
- b. ☐ Other _____

3. Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 07-1850
- i. ☒ RCE fee required under 37 C.F.R. 1.17(e) 12/12/2003 DTESSEM1 00000068 071850 09998764
- ii. ☐ Extension of time fee (37 C.F.R. 1.136 and 1.17) 01 FC:1801 770.00 DA
- iii. ☐ Other _____
- b. ☐ Check in the amount of \$ _____ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

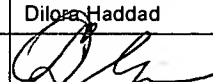
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	Cameron K. Kerrigan	Registration No. (Attorney/Agent)	44,826
Signature		Date	December 9, 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express mail in an envelope addressed to: Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

Name (Print /Type)	Dilora Haddad		
Signature		Date	December 9, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA 22313-1450.



FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$750.00)**

Complete if Known

Application Number **09/998,764**
Filing Date **November 29, 2001**
First Named Inventor **Masaki Nakamura**
Group Art Unit **1755**
Examiner Name **Shalie A. Manlove**
Attorney Docket Number **56232.13**

RECEIVED
DEC 16 2003
TC 1700

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to:

- ☒ Charge the indicated fees to the below mentioned deposit account.
☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.[†]
☐ Applicant claims small entity status. See 37 CFR 1.27.

Deposit Account Number: 07-1850
Deposit Account Name: Squire, Sanders & Dempsey

A Duplicate Copy of this authorization is attached

2. ☐ Payment Enclosed:
[] Check [] Other

FEE CALCULATION (fees effective 10/1/01)

1. FILING FEE

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
101/\$740	201/\$370	Utility Filing	<input type="text"/>
106/\$330	206/\$165	Design Filing	<input type="text"/>
108/\$740	208/\$370	Reissue	<input type="text"/>
114/\$160	214/\$80	Provisional Filing	<input type="text"/>
SUBTOTAL (1)			(\$0)

2. CLAIMS

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
103/\$18	203/\$9	Claims in excess of 20
102/\$84	202/\$42	Independent claims in excess of 3
104/\$280	204/\$140	Multiple dependent claim
109/\$84	209/\$42	Reissue independent claims over original patent
110/\$18	210/\$9	Reissue claims in excess of 20 and over original patent

3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
105/\$130	205/\$65	Surcharge - late filing fee or oath	<input type="text"/>
127/\$50	227/\$25	Surcharge-late provisional filing fee or cover sheet	<input type="text"/>
147/\$2,520	147/\$2,520	For filing a request for reexamination	<input type="text"/>
115/\$110	215/\$55	Extension for response within first month [†]	<input type="text"/>
116/\$400	216/\$200	Extension for response within second month [†]	<input type="text"/>
117/\$920	217/\$460	Extension for response within third month [†]	<input type="text"/>
118/\$1,440	218/\$720	Extension for response within fourth month [†]	<input type="text"/>
128/\$1,960	228/\$980	Extension for response within fifth month [†]	<input type="text"/>
119/\$320	219/\$160	Notice of Appeal	<input type="text"/>
141/\$1,280	241/\$640	Petition to revive unintentionally abandoned application	<input type="text"/>
142/\$1,280	242/\$640	Utility Issue Fee (Or Reissue)	<input type="text"/>
143/\$460	243/\$230	Design Issue Fee	<input type="text"/>
122/\$130	122/\$130	Petitions to the Commissioner	<input type="text"/>
123/\$50	123/\$50	Petitions related to provisional applications	<input type="text"/>
126/\$180	126/\$180	Submission of Information Disclosure Statement	<input type="text"/>
581/\$40	581/\$40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146/\$740	246/\$370	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="text"/>
179/\$740	279/\$370	Request for Continued Examination (RCE)	750
Other fee (specify):			<input type="text"/>
Other fee (specify):			<input type="text"/>
SUBTOTAL (3)			(\$750.00)

(Col. 1)		(Col. 2)		(Col. 3)		Fee		Fee Due	
For	No. of Existing Claims	minus*	Highest No. Previously Paid For	=	Extra**	x		=	
TOTAL	8	minus*	20 or 33	=	0	x	\$18	=	\$0
INDEP	1	minus*	3 or 6	=	0	x	\$86	=	\$0
[] First presentation of multiple dependent claim									

* Subtract the greater number of Col. 2

** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) **(\$0)**

SUBMITTED BY

Typed or Printed Name **Cameron K. Kerrigan**

Signature

Complete (if applicable)

Reg. Number **44,826**

Date

December 9, 2003